1407981

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL									
OMB Number: 3235-0076									
Expires:									
1 '	Estimated average burden								
hours per response 16.00									
hours per respon	se16.00								
hours per respon									

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	·
Sale of Membership Units	
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 46	(6) ULOE
Type of Filing:	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	I IDDAN SERVICEN CONTROL NO CONTR
Resource4Realtors, LLC	07073329
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3710 University Drive, Durham, NC 27707	[open]
Address of Principal Business Operations (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Same as above.	Same as above.
Brief Description of Business	
Provider of web-based software.	
Type of Business Organization	PROCESSED
	(please specify):
	ability company JUL 27 2007
Month Year	
	timated THOMSUN
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	PHANIXAL
en for canada, en for other foreign jurisdiction)	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A. BASIC IDE	ENTH	FICATION DATA				
2. Enter the information re	quested for the fo	llowin	g:				•		
<ul> <li>Each promoter of t</li> </ul>	he issuer, if the is.	suer h	as been organized w	ithin (	the past five years;				
<ul> <li>Each beneficial ow</li> </ul>	ner having the pow	er to v	ote or dispose, or dir	ect th	e vote or disposition	of, 10'	% or more o	f a clas	s of equity securities of the issuer.
Each executive off	icer and director o	f corp	orate issuers and of	corpo	rate general and man	aging	partners of	partno	rship issuers; and
<ul> <li>Each general and r</li> </ul>	nanaging partner o	f part	nership issuers.						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Rogers, Ronald R.	f individual)				<del></del>				
Business or Residence Addre c/o Resource4Realtors, I					7707				
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Swadley, Benjamin									
Business or Residence Addre					707				
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Kordoulis, Dionysios	f individual)				<u> </u>	-			,
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					<u> </u>
1111 Nichols Farm Drive,	Durham, NC 2	7703							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								•
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					44
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								•
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
	(Use bla	nk she	et, or copy and use	additi	onal copies of this st	nect, a	s necessary	)	

					В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									•	Yes	No	
١.	rias inc	issuel soil	i, or does t			n, to non-a i Appendix							x
2.	What is	the minim	um investn			pted from		_				s <sup>25</sup> ,	00.000
												Yes	No
3.	Does the offering permit joint ownership of a single unit?										×		
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									!			
Ful N/A		Last name	first, if ind	ividual)									
		Residence	Address (N	lumber and	l Street, C	ity, State, 2	Zip Code)		<del></del>	- <del></del>			
							•						
Nar	ne of As:	sociated Br	oker or De	aler									
Stat	tes in Wh	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	***************************************			.,,,	***************		☐ Al	1 States
	ĀL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE SC	NV)	NH	NI	NM LUE	NY	NC VA	ND WA	OH WY	OK]	OR WV	PA
	RI	SC	SD	TN	[TX]	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)							•		
Bus	iness or	Residence	Address ()	Number an	d Street, C	ity, State,	Zip Code)	<del>.</del>					
	<b>T</b> W ·												
Nar	ne of Ass	sociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)				******	*****************		☐ AI	l States
	[AL]	AK	AZ	AR	CA	CO)	CT	DE	DC	FL	GA]	Н	ĪĎ
		IN	IA	KS	KY	LA	ME	MD	MΛ	MI	MN	MS	MO
	MT	NE	NV	NH	[N]	NM	NY	NC	ND	OH	OK]	OR	PA
	RI	SC	SD	TN	TX	UT	VT	[VA]	[WA]	[WV]	[WI]	WY	PR
Full	Name (1	Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, I	Zip Code)						<del></del>
Nan	ne of Ass	sociated Br	oker or De	aler					·				
<u> </u>	. 11/1			A 12 5 4									
Stat						to Solicit l							l States
	AL IL	AK [N]	$\Delta Z$	[AR]	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	MS]	MO
	MT	NE	NV	NH	NJ	NM)	NY	NC	ND	OH	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	wi)	WY	PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		-	¢
	Debt		
			_ \$_120,000.00
	✓ Common Preferred	•	e.
	Convertible Securities (including warrants)		
	Partnership Interests	•	
	Other (Specify)		
	Total	7.30,000.00	<u>\$_125,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	
	Non-accredited Investors	0	S_0.00
	Total (for filings under Rule 504 only)		. s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	The second of	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	<del></del>	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 25,000.00
	Accounting Fees		. ————————————————————————————————————
	Engineering Fees		, <u></u> ) \$
	Sales Commissions (specify finders' fees separately)	<b>.</b>	\$
	Other Expenses (identify)	_	\$ 350.00
	Total		05.050.00

L	C. OFFERING PRICE, NUM	ABER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS	
	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross rt C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[	<b></b> \$	
	Purchase of real estate		\$	. 🗆 \$
	Purchase, rental or leasing and installation of ma	achinery [	<u> </u>	. 🗆 \$
	Construction or leasing of plant buildings and fa	cilities	<b></b> \$	. 🗆 \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the assissuer pursuant to a merger)		¬\$	<b>□\$</b>
			_	_
	Other (specify):		 \$	
			\$	. 🗆 \$
	Column Totals		<u>\$_0.00</u>	<u> 724,650.00</u>
	Total Payments Listed (column totals added)		\$	24,650.00
		D. FEDERAL SIGNATURE		
sign	ature constitutes an undertaking by the issuer to fu	ne undersigned duly authorized person. If this notice urnish to the U.S. Securities and Exchange Commiscredited investor pursuant to paragraph (b)(2) of I	sion, upon writte	
Isst	er (Print or Type)	Signature	Date	
	source4Realtors, LLC		July <u>27</u> , 2007	
Nai	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Ror	ald R. Rogers	Manager		

# - ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001,)

•	٠				E. STATE SIGNATURE			
1.	Is any par	ty describ	ed in 17 CFR 2	30,262 pre	esently subject to any of the di	squalification	Yes	No
	provisions	of such	rule?	· · · · · · · · · · · · · · · · · · ·				×

See Appendix. Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)		Date
Resource4Realtors, LLC		July <u><b>2 Y</b></u> , 2007
Name (Print or Type)	Title (Print or Type)	
Ronald R. Rogers	Manager	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX 1 2 4 5 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State offered in state investors in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Investors Yes No State Amount Amount ALΑK AZAR $\mathsf{C}\mathsf{A}$ CO CT DE DC FL $\mathsf{G}\mathsf{A}$ Н ID ΙL IN IA KS KY LA ME MD MA ΜI MN MS

### **APPENDIX** 4 l 2 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited Yes No State Yes No Investors Amount Investors Amount MO MT NE NVNH NJ NM NY Equity; \$750,000 \$0.00 NC \$25,000.00 X ND ОН OK OR PA RI SC SD TN TX UT VT VAWA WV WI

	APPENDIX										
1		2	3		4						
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY PR											

